

Application # Harnett County Central Permitting 420 McKinney Pkwy Lillington, NC 27546 PO Box 65 Lillington, NC 27546 * Must be owner/occupier or licensed contractor. Address, 910-893-7525 ext. 1 Fax 910-893-2793 www.harnett.org/permits company name & phone must match information on license. **Application for Residential Building and Trades Permit** Owner's Name: Lamco Custom Builders, LLC Date 2/1/22 Site Address: <u>35 Southern Pl</u> Phone <u>919-307-4254</u> Subdivision: Currin Plantation Lot 39 Description of Proposed Work: repairs from home fire Total Job Cost <u>\$80,000.00</u> **General Contractor Information** Lamco Custom Builders, LLC 919-307-4254 Building Contractor's Company Name Telephone 7424 Chapel Hill Rd #203, Raleigh NC 27607 info@lamcohomes.com Address Email Address HEATED SQ FT 1612 GARAGE SQ FT 417 License # **Electrical Contractor Information** Description of Work repair damage done by fire per engineerService Size: 200 Amps T-Pole: X Yes No Ideal Electric Inc. 734-927-7440 Electrical Contractor's Company Name Telephone PO Box 969, Farmington MI 48332 Address Email Address 27098-U License #

59567

Mechanical/HVAC Contractor Information Description of Work Repair damage done by fire

Propan damage deno by me	
Total Systems Heating and Cooling Inc	910-436-2839
Mechanical Contractor's Company Name	Telephone
13341 NC Hwy 210S, Spring Lake NC 28390	service@totalsystemsnc.com
Address	Email Address
28846	
License #	
Plumbing Contractor Information	
Description of Work repair damage done by fire	_# Baths_2
A&M Contractors, Inc	910-652-6230
Plumbing Contractor's Company Name	Telephone
PO Box 1020, Ellerbe NC 28338	amc1@rsnet.org
Address	Email Address
28648	
License #	
Insulation Contractor Information	

Tri-City Insulation, 7204 Becky Circle, Raleigh NC 919-369-4730 Insulation Contractor's Company Name & Address Telephone

*NOTE: General Contractor / owner must fill out and sign the second page of this application.



I hereby certify that I have the authority to make necessary application, that the application is correct and that the construction will conform to the regulations in the Building, Electrical, Plumbing and Mechanical codes, and the Harnett County Zoning Ordinance. I state the information on the above contractors is correct as known to me and that <u>by signing below I have obtained all subcontractors</u> <u>permission to obtain these permits</u> and if <u>any</u> changes occur including listed contractors, site plan, number of bedrooms, building and trade plans, Environmental Health permit changes or proposed use changes, I certify it is my responsibility to notify the Harnett County Central Permitting Department of any and all changes.

EXPIRED PERMIT FEES - 6 Months to 2 years permit re-issue fee is \$150.00. After 2 years re-issue fee is as per current fee schedule.

Signature of Owner/Contractor/Officer(s) of Corporation

02/01/2022 Date

Affidavit for Worker's Compensation N.C.G.S. 87-14 The undersigned applicant being the:	
General Contractor Owner X Officer/Agent of the Contractor or Owner	
Do hereby confirm under penalties of perjury that the person(s), firm(s) or corporation(s) performing the work set forth in the permit:	
Has three (3) or more employees and has obtained workers' compensation insurance to cover them.	
Has one (1) or more subcontractors(s) and has obtained workers' compensation insurance to cover them.	
X Has one (1) or more subcontractors(s) who has their own policy of workers' compensation insurance covering themselves.	
Has no more than two (2) employees and no subcontractors.	
While working on the project for which this permit is sought it is understood that the Central Permitting Department issuing the permit may require certificates of coverage of worker's compensation insurance prior to issuance of the permit and at any time during the permitted work from any person, firm or corporation carrying out the work.	
Sign w/Title: VP Construction Date: 02/01/2022	